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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION

RECEIVED
FEB 1 0 2017
THOMAS G. BRUTON
CLERK, U.S. DISTRICT COURT

FORREST FRANKLIN
20150714260

(Enter above the full name of the plaintiff or plaintiffs in this action)

vs.

Case No: 16-C11721
(To be supplied by the Clerk of this Court)

OFFICER GUERRO, Et al,

(Enter above the full name of ALL defendants in this action. Do not use "et al.")

CHECK ONE ONLY:

AMENDED COMPLAINT

✓ **COMPLAINT UNDER THE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983 U.S. Code** (state, county, or municipal defendants)

____ **COMPLAINT UNDER THE CONSTITUTION ("BIVENS" ACTION), TITLE 28 SECTION 1331 U.S. Code** (federal defendants)

____ **OTHER** (cite statute, if known)

BEFORE FILLING OUT THIS COMPLAINT, PLEASE REFER TO "INSTRUCTIONS FOR FILING." FOLLOW THESE INSTRUCTIONS CAREFULLY.

I. Plaintiff(s):

A. Name: FORREST FRANKLIN

B. List all aliases: N/A

C. Prisoner identification number: 20150714260

D. Place of present confinement: COOK COUNTY JAIL

E. Address: P.O BOX 089002 CHICAGO, ILL 60608

(If there is more than one plaintiff, then each plaintiff must list his or her name, aliases, I.D. number, place of confinement, and current address according to the above format on a separate sheet of paper.)

II. Defendant(s):

(In **A** below, place the full name of the first defendant in the first blank, his or her official position in the second blank, and his or her place of employment in the third blank. Space for two additional defendants is provided in **B** and **C**.)

A. Defendant: OFFICER GUERRO, et al,

Title: CHICAGO POLICE OFFICER

Place of Employment: CHICAGO POLICE DEPARTMENT 1438 W. 63 ST.

B. Defendant: ______

Title: ______

Place of Employment: ______

C. Defendant: ______

Title: ______

Place of Employment: ______

(If you have more than three defendants, then all additional defendants must be listed according to the above format on a separate sheet of paper.)

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

III. List ALL lawsuits you (and your co-plaintiffs, if any) have filed in any state or federal court in the United States:

A. Name of case and docket number: 16-C11721

B. Approximate date of filing lawsuit: 1-10-17

C. List all plaintiffs (if you had co-plaintiffs), including any aliases: FURREST FRANKLIN

D. List all defendants: OFFICER GUERRO, et al,

E. Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county): COOK COUNTY

F. Name of judge to whom case was assigned: JORGE L. ALONSO

G. Basic claim made: JUMP ON BY THE OFFICER&PHYSICALLY ABUSED.

H. Disposition of this case (for example: Was the case dismissed? Was it appealed? Is it still pending?): CASE WAS DISMISSED

I. Approximate date of disposition: 8/9/13

IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. CO-PLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. **Do not give any legal arguments or cite any cases or statutes.** If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

I WAS TRANSPORTED BY OFFICER GUERRO, TO THE POLICE STATION, ON AUGUST 9, 2013 WHERE THE PHYSICAL ABUSE+ OCCURRED. PICTURES WERE TAKEN OF ALL INJURIES ALSO DONE ON AUGUST, 11, 2013 SUNDAY MORNING. PICTURES WERE TAKEN AT COOK COUNTY [illegible] BY A MS. ELIZABETH PATEN OF PUBLIC DEFENDER OFFICE, BY HER ASSISTANT AND A INVESTAGATOR. I WAS ABUSED BY THE OFFICERS IN THE LOCK UP. THESE PICTURES SHOULD BE ON FILE AT THE PUBLIC DEFENDER OFFICE. I DONT REMEMBER THE OFFICERS NAME THAT WERE IN LOCK UP THAT DAY BUT I AM SURE ALL OF THIS INFORMATION IS ON FILE.

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

V. Relief:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

I WOULD LIKE TO BE COMPENSATED FOR THE MENTAL AND PHYSICAL ABUSE AND PROPERTY THAT LOST IN THIS CASE.

VI. The plaintiff demands that the case be tried by a jury. ☐ YES ☑ NO

CERTIFICATION

By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.

Signed this 1 day of 10, 2017

Mr. Forrest Franklin

(Signature of plaintiff or plaintiffs)

MR. FORREST FRANKLIN

(Print name)

2015071426 0

(I.D. Number)

P.O BOX 089002

CHICAGO, IL 60608

(Address)

Forrest Franklin 20150714260
PO Box 089002 Div-11-403
Chicago IL 60608

Prisoner correspondence
Clerk's Office
U.S. District court
219 South Dearborn Street
Chicago IL 60604

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CLERK, U.S. DISTRICT COURT

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